UNITED STATES BANKRUPTCY COURT FOR THE SOUTHERN DISTRICT OF TEXAS

	` `	
In re:)	Chapter 11
SORRENTO THERAPEUTICS, INC., et al. ¹)	Case No. 23-90085 (DRJ)
Debtors.)	(Jointly Administered)
)	

STATEMENT OF FINANCIAL AFFAIRS FOR SCINTILLA PHARMACEUTICALS, INC. (CASE NO. 23-90084)

The Debtor entities in these chapter 11 cases, along with the last four digits of each Debtor entity's federal tax identification number, are: Sorrento Therapeutics, Inc. (4842) and Scintilla Pharmaceuticals, Inc. (7956). The Debtors' service address is: 4955 Directors Place, San Diego, CA 92121.

Fill in this information to	identify the case:			
Debtor name: Scintilla Ph	narmaceuticals, Inc.			
United States Bankruptcy	Court for the: Southern Dis	trict of Texas		
Case number: 23-90084				Check if this is an amended filing
				amended ming
Official Form 207				
Statement of Finar	ncial Affairs for No	n-Individuals Filing	for Bankruptcy	04/22
The debtor must answer encase number (if known). Part 1: Income	very question. If more space	e is needed, attach a separate	sheet to this form. On the top of any additional pa	ages, write the debtor's name and
. Gross revenue from busi	ness			
Identify the beginning and a calendar year	ending dates of the debtor	s fiscal year, which may be	Sources of revenue Check all that apply	Gross revenue (before deductions and exclusions)
From the beginning of the fiscal year to filing date:	From	to <u>Filing Date</u>	Operating a business Other	
For prior year:	From	to	Operating a business Other	
For the year before that:	From	to	Operating a business Other	
		axable. Non-business income ot include revenue listed in line	may include interest, dividends, money collected fr e 1.	om lawsuits, and royalties. List each
			Description of sources of revenue	Gross revenue from each source (before deductions and exclusions)
From the beginning of he fiscal year to filing late:	From	to <u>Filing Date</u>		
or prior year:	From	to		
or the year before that:	From	to		

6.1

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Part 2:	List Certain Transfers Made Before Filing for Bankruptc

List pay aggrega	nin payments or transfers to creditors within 90 or rments or transfers - including expense reimburse ate value of all property transferred to that credito or after the date of adjustment.)	ements - to any creditor, other			-
Credito	or's name and address	Dates	Total amount or value	Reasons for payment or tra	ansfer
3.1				Secured debt Unsecured loan repaymen Suppliers or vendors Services Other	ts
List pay insider u years af control	nents or other transfers of property made within ments or transfers, including expense reimburse unless the aggregate value of all property transfeter that with respect to cases filed on or after the of a corporate debtor and their relatives; general ng agent of the debtor. 11 U.S.C. § 101(31).	ments, made within 1 year bef erred to or for the benefit of the e date of adjustment.) Do not i	ore filing this case on debts on the control of the	This amount may be adjusted I line 3. Insiders include officer	on 4/01/25 and every 3 s, directors, and anyone in
Insider	r's name and address	Dates	Total amount or value	Reasons for payment or tra	ansfer
4.1	Relationship to debtor			Secured debt Unsecured loan repaymen Suppliers or vendors Services Other	ts
List all p transfer	ssessions, foreclosures, and returns property of the debtor that was obtained by a cree tred by a deed in lieu of foreclosure, or returned to include property listed in line 6.		this case, including property	repossessed by a creditor, sol	d at a foreclosure sale,
Credito	or's name and address	Description of the property	y	Date	Value of property
	creditor, including a bank or financial institution, sion or refused to make a payment at the debtor's				ount of the debtor without
Credito	or's name and address	Description of the action of	reditor took	Date action was taken	Amount

Last 4 digits of account number

Debtor	<

City

Recipient's relationship to debtor

State

Zip

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Part 3:	Legal Actions or Assignments	
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List th	pal actions, administrative proceeding le legal actions, proceedings, invest before filing this case.	• .	•			volved in any capacity—within 1
Case	title	Nature of o	Court or agency's name a		me and address	Status of case
7.1	Name			Name		Pending
	Case number			Street		—
				City	State Zip	_
other	ny property in the hands of an assig court-appointed officer within 1 yea None odian's name and address				case and any property in the hai	nds of a receiver, custodian, or
8.1	Custodian's name and address					
	Street		Case title		Court name and addres Name	ss
	City State	Zip	Case number		Street	
			Date of order or assignme	ent	City	State Zip
	t all gifts or charitable contributions than \$1,000			rs before filing this case	unless the aggregate value of	the gifts to that recipient is
	pient's name and address		Description of the gifts o	r contributions	Dates given	Value
9.1	Recipient's name					
	Street					

Debtor Scintilla Pharmaceuticals, Inc. Case number (if known) 23-90084 Case 23-90085 Document 713 Filed in TXSB on 05/26/23 Page 5 of 12

Part 5: Losses			
 All losses from fire, theft, or other casualty within to None 	1 year before filing this case		
Description of the property lost and how the loss occurred	Amount of payments received for the loss If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).	Date of loss	Value of property lost
10.1			
Part 6: Certain Payments or Transfers			
	erty made by the debtor or person acting on behalf of the del nsulted about debt consolidation or restructuring, seeking b		
Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.1			
Email or website address			
Who made the payment, if not debtor?			
12. Self-settled trusts of which the debtor is a beneficing is any payments or transfers of property made by the similar device. Do not include transfers already listed on this statement None	debtor or a person acting on behalf of the debtor within 10	years before the filing of this	case to a self-settled trust o
Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
12.1			
Trustee			
	rade, or any other means made by the debtor or a person ac sferred in the ordinary course of business or financial affair red on this statement.		
Who received transfer?	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.1			
Relationship to debtor			
	-		

rait /.	Flevious Locations							
	evious addresses	the debter within 2	vaara hafara filin	a this sees and	the detection	addragaga wara ua	ad	
	previous addresses used by to oes not apply	the deptor within 3	years before illin	ig this case and	the dates the a	addresses were us	ea.	
Addre						Dates of occupa	nev	
Addie						Dates of occupa	illey	
14.1	Street					From	to	
	Street							
	City		State	Zip				
Part 8:	Health Care Bankrupt	cies						
15. He	alth Care bankruptcies							
	lebtor primarily engaged in of agnosing or treating injury, de							
☐ pr	oviding any surgical, psychiat	ric, drug treatment,	or obstetric care	e?				
✓ N	o. Go to part 9.							
	es. Fill in the information belo	ow						
Facility name and address				Nature of the debtor provide		ration, including t	ype of services the	If debtor provides meals and housing,
								number of patients in debtor's care
15.1								
	Street							
	City	State	Zip			ords are maintaine any service provider	d (if different from facility	How are records kept? Check all that apply: Electronically
			_				_	Paper
Down Or	Dersonally Identifiable	a Infarmation						r aper
Part 9:	Personally Identifiable	e imormation						
16. Do	es the debtor collect and reta	ain personally ident	tifiable information	on of customers	s?			
	es. State the nature of the info	ormation collected	and retained					
	Does the debtor have a		_	n?				
	No	p, p, a						
	Yes							
	hin 6 years before filing this		ployees of the de	ebtor been parti	cipants in any	ERISA, 401(k), 40	3(b), or other pension or	profit-sharing plan made
	lle by the debtor as an emplo b. Go to Part 10.	yee benefit?						
_	s. Does the debtor serve as p	olan administrator?						
	No. Go to Part 10.							
	Yes. Fill in below:							
Name	of plan				Employer ider	ntification number	of the plan	
Has th	e plan been terminated?				-			
□ Ye	es							

Name

Street

City

State

Zip

Address

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Part 10:	Certain Financial Accounts,	Safe Deposit Boxes,	and Storage Units

Within Include	checking, savings, mor ations, and other financi	ney market, o	or other f					debtor's benefit, closed, solo edit unions, brokerage hous	
Finan	cial institution name an	d address			Last 4 digits of account number	Type of acc	ount	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
			State 	Zip curities, cash, or ot	her valuables th	Checking Savings Money m Brokerag Other	narket ge	vithin 1 year before filing thi	s case.
	sitory institution name a	and address		Names of	anyone with acc	cess to it	Description	of the contents	Does debtor still have it?
	SS.		Zip ————————————————————————————————————	Address Address Ses within 1 year bef	ore filing this ca	se. Do not inclu	ude facilities th	at are in a part of a building	No Yes in which the debtor does
	ty name and address			Names of	anyone with acc	cess to it	Description	of the contents	Does debtor still have it?
20.1									

 $\, \, \square_{\, \text{No}}$

 \square Yes

State Zip

City

City

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art 11:	Property the Debtor Holds	or Controls that the Debtor Does Not Own		
		ontrols that another entity owns. Include any property bo	rrowed from, being stored for, or held in trust	. Do not list leased or rented
Owner's	s name and address	Location of the property	Description of the property	Value
1.1				
art 12:	Details About Environmen	tal Information		
	burpose of Part 12, the following d Environmental law means any statu or any other medium).	lefinitions apply: ute or governmental regulation that concerns pollution, contami	nation, or hazardous material, regardless of the m	edium affected (air, land, water,
•	Site means any location, facility, or pr	roperty, including disposal sites, that the debtor now owns, open	rates, or utilizes or that the debtor formerly owned	, operated, or utilized.
•	Hazardous material means anythin	g that an environmental law defines as hazardous or toxic, or do	escribes as a pollutant, contaminant, or a similarly	harmful substance.
eport a	II notices, releases, and proceedir	ngs known, regardless of when they occurred.		
2. Has	the debtor been a party in any judi	icial or administrative proceeding under any environmen	tal law? Include settlements and orders	
✓ No.				
Yes	. Provide details below.			
Case tit	tle	Court or agency name and address	Nature of the case	Status of case
2.1		Name		Danding
(Case Number	Name		☐ Pending ☐ On appeal
_		Street		Concluded
		City State Zip		concluded
	any governmental unit otherwise i	notified the debtor that the debtor may be liable or poter	tially liable under or in violation of an enviro	nmental law?
✓ No □ Yes	. Provide details below.			
	me and address	Governmental unit name and address	Environmental law, if known	Date of notice
3.1	Name	Name		
	Street	Street		

State

Zip

No Yes. Provid	le details below.		Governmen	ntal unit name and	address	Environmenta	l law, if known	Date of notice
l.1 Name			Name					
Street			Street			_		
City	State	Zip	City		State Zip	<u> </u>		
i. Other businest any businest	esses in which t	ne debtor h	nas or has had	d an interest	therwise a person in c	ontrol within 6 years	before filing this case	e. Include this information eve
5. Other businest any businest any businest ready listed in None	esses in which t as for which the o the Schedules.	ne debtor h	nas or has had	I an interest rtner, member, or o	therwise a person in c	ontrol within 6 years		e. Include this information eve
5. Other businest any businest any businest ready listed in None	esses in which t	ne debtor h	nas or has had	I an interest rtner, member, or o		ontrol within 6 years	Employer Identificati	
o. Other businest any businest any businest eady listed in None	esses in which t as for which the o the Schedules.	ne debtor h	nas or has had	I an interest rtner, member, or o	therwise a person in c		Employer Identificati	ion number
Other busined that any busined eady listed in None usiness name	esses in which t as for which the o the Schedules.	ne debtor h	nas or has had	I an interest rtner, member, or o	therwise a person in c		Employer Identificati Do not include Social	ion number I Security number or ITIN.

Najjam Asghar - CFO

4955 Directors Place San Diego, CA 92121

Liang Zhao - Controller

Elizabeth Czerepak - CFO

4955 Directors Place San Diego, CA 92121

4955 Directors Place San Diego, CA 92121

26a.2

26a.3

From

From

From

5/18/2022

2/7/2022

6/25/2019

to

to

1/7/2022

4/7/2023

Present

Debtor Scintilla Pharmaceuticals, Inc.

Case number (if known) 23-90084

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26b. List a this case.	all firms or individuals who have audited, compiled, or reviewed debtor's book	ks of account and records or μ	orepared a finan	cial statemen	within 2 years before filing		
Name and address				Dates of service			
43	rnst & Young 365 Executive Drive an Diego, CA 92121		From 6/26/2020		to Present		
26c. List a	all firms or individuals who were in possession of the debtor's books of accord	unt and records when this cas	se is filed.				
Name an	d address		If any books explain why	of account an	d records are unavailable,		
49 Sa		I trade agencies, to whom the	debtor issued a	financial state	ement within 2 years before		
	d address						
26d.1	inancial statements are issued in the ordinary course of business.						
27. Invent Have any i	cories inventories of the debtor's property been taken within 2 years before filing th	is case?					
Yes.	Give the details about the two most recent inventories.						
Name of	the person who supervised the taking of the inventory	Date of inventory	The dollar a basis) of each		sis (cost, market, or other		
	ne debtor's officers, directors, managing members, general partners, membo e filing of this case.	ers in control, controlling sha	reholders, or ot	her people in (control of the debtor at the		
Name an	d Address	Position and nature of any	/ interest	% of interes	t, if any		
49	enry Ji 955 Directors Place an Diego, CA 92121	Chairman of the Board, Chie Officer, President and Treas					

Scintilla Pharmaceuticals, Inc.

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29. Within 1 year before the filing of this case, did the debtor have office shareholders in control of the debtor who no longer hold these position No		managing members, general	partners, mem	bers in control	of the debtor, or		
Yes. Identify below.							
Name and Address		Position and nature of any	interest	Period durin interest was	g which position or held		
29.1				From	to		
30. Payments, distributions, or withdrawals credited or given to inside Within 1 year before filing this case, did the debtor provide an insider wistock redemptions, and options exercised? No Yes. Identify below.		form, including salary, other c	ompensation, d	raws, bonuses	, loans, credits on loans,		
Name and address of recipient	Amount of r	noney or description and perty	Dates		Reason for providing the value		
30.1							
Relationship To Debtor							
31.Within 6 years before filing this case, has the debtor been a member No Yes. Identify below.	er of any consol	idated group for tax purpose	s?				
Name of the parent corporation				Employer Identification number of the parent corporation			
31.1 Sorrento Therapeutics, Inc.			EIN 33-	0344842			
32.Within 6 years before filing this case, has the debtor as an employe No	er been respons	ible for contributing to a pen	sion fund?				
Yes. Identify below. Name of the pension fund			Employer Ide	entification nur	mber of the pension fund		
32 1							

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Fill in this information to identify the case:	
Debtor name: Scintilla Pharmaceuticals, Inc.	
United States Bankruptcy Court for the: Southern District of Texas	
Case number: 23-90084	Check if this is an amended filing
	-
WARNING - Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obt in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3 I have examined the information in this Statement of Financial Affairs and any attachments a I declare under penalty of perjury that the foregoing is true and correct.	571.
Executed on 05/25/2023	
/s/Henry Ji Henry S	İ
Signature of individual signing on behalf of debtor Printed	name
Chairman of the Board, Chief Executive Officer, President and Treasurer	
Position or relationship to debtor	
Are additional pages to Statement of Financial Affairs for Non-Individuals Filing for Bankrup No Yes	tcy (Official Form 207) attached?